



MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION
DIVISION OF ADMINISTRATIVE AND FINANCIAL SERVICES
SCHOOL FOOD SERVICES SECTION

SEAMLESS SUMMER OPTION APPLICATION

| SECTION 1 Description of the Local Education Agency (LEA) | |
|---|----------------------------------|
| Directions: Fill in the appropriate requested information below | |
| LEA Name: | LEA Agreement Number: |
| Name of Authorized Representative: | Date: |
| LEA Street Address: | Deadline: MAY 31, 2006 |
| City, State, and Zip Code: | Phone Number: () |
| | Fax Number: () |

State Contact:

Laina Fullum
Department of Elementary and Secondary Education
Division of Administrative and Financial Services
School Food Services Section
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SECTION 2**Building Name and Number**

Directions: List each of the school/site names and building numbers operating the Seamless Summer Option

| Building Number | School/Site Name |
|-----------------|------------------|
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. | |
| 6. | |
| 7. | |
| 8. | |
| 9. | |
| 10. | |
| 11. | |
| 12. | |
| 13. | |
| 14. | |
| 15. | |
| 16. | |

SECTION 3

2006 SEAMLESS SUMMER OPTION SITE APPLICATION

Directions: Fill out a site application for each site

**1. Name and address of School/Site
(Include building number)**
2. Period of Operation

☐ Check box if operating on a year-round schedule

Summer Operation Dates
From: (M/D/YR)
To: (M/D/YR)
Number of Operating Days
May
June
July
August
Sept.

Telephone Number ()

3. Type of Site and Eligibility

☐ **Open** (1-2 Meals) Located in an eligible area and open to all children through age 18 in the community.

Qualified by: _____ % Free and Reduced approved, school data, (October 2005)

_____ Other _____

☐ **Restricted Open** (1-2 Meals) Located in an eligible area and open to all children through age 18 in the community, which the sponsor restricts or limits attendance for reasons of security, safety or control. (Attach narrative and documentation stating the nature of the restriction and reason.)

☐ **Closed Enrolled** (1-2 Meals) Located in an eligible area (enrichment only) or non-eligible area that is limited to a group of enrolled children through age 18, of which at least 50% must be eligible for free or reduced priced meals. LEA must provide explanation of how it was determined that at least 50% of the enrolled children in a non-eligible area qualified for free and reduced price meals. _____

Why sponsoring a closed site? _____

☐ **Migrant** (1-3 Meals) (Attach letter verifying site is a migrant site.)

☐ **Camp** (1-3 Meals) _____ Residential or _____ Non-residential

Why sponsoring a camp? _____

(Provide statement certifying that only meals served to children eligible for free and reduced price meals will be claimed for reimbursement.)

4. If LEA is not providing site personnel, give name of organization and title of the person responsible for communication between the LEA and the organization:

Organization _____ Person Responsible _____

5. Site Meal Data: Limit selection to 2 meals

| Type of Meals to be served | Estimated Number to be served | Time of Meal Service | | Days of week meal served |
|----------------------------|-------------------------------|----------------------|------|--------------------------|
| | | Begins | Ends | |
| Breakfast | | | | |
| Snack | | | | |
| Lunch | | | | |
| Supper | | | | |

6. How will the availability of meal services (including the hours, days, and weeks that meals will be served) be advertised to the neighborhood community?

